

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Medical Review Division regarding a medical fee dispute between the requestor and the respondent named above.

### **I. DISPUTE**

1. a. Whether there should be reimbursement of \$727.50 for dates of service commencing on 02/15/01 and extending through 06/07/01.
- b. The request was received on 02/13/02.

### **II. EXHIBITS**

1. Requestor, Exhibit I:
  - a. TWCC 60 and Letter Requesting Dispute Resolution
  - b. HCFA(s)
  - c. EOB/TWCC 62 forms/Medical Audit summary
  - d. Medical Records
  - e. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
2. Respondent, Exhibit II:
  - a. TWCC 60
  - b. Fax Transmittal dated 09/24/02
  - c. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
3. Notice of "No Carrier Sign Sheet" reflected as Exhibit III of the Commission's case file.

### **III. PARTIES' POSITIONS**

1. Requestor: Letter 02/13/02

"The services which are in question do not have EOB's. On 9-7-2001 my staff person, \_\_\_\_, called (Carrier) and talked with a claims specialist, \_\_\_\_ concerning the unpaid services. \_\_\_\_ did some searching and found all the claims. She stated she was resubmitting them for reconsideration. Even then we did not [sic] get EOB's for these claims. We did get EOB's for some of the other claims."
2. Respondent: No position statement.

#### **IV. FINDINGS**

1. Based on Commission Rule 133.307(d) (1) (2), the only dates of service eligible for review are those commencing on 02/15/01 and extending through 06/07/01.
2. This decision is being written based on the documentation that was in the file at the time it was assigned to this Medical Dispute Resolution Officer.
3. Per the Requestor's Table of Disputed Services, the Requestor billed the Carrier \$727.50 for services rendered on the dates in dispute.
4. Per the Requestor's Table of Disputed Services, the Carrier paid the Requestor \$0.00 for services rendered on the date of service in dispute above and denied any additional reimbursement.
5. Per the Requestor's Table of Disputed Services, the amount in dispute is \$727.50 for services rendered on the date of service in dispute above.
6. A fax transmittal received on 09/24/02 from the Carrier's representative states, "...the Carrier has reviewed their file and is in the process of placing the charges in question in this dispute in line for payment. Please note, one of the problems appears to be that there were two dates of injury involved. The first was \_\_\_\_ with a TWCC No. of \_\_\_\_\_. The carrier's claim number for this Date [sic] of injury is \_\_\_\_\_. They will be paying for charges for Dates of Service of 2/27/01 to 11/27/01 under this date of injury and claim number. The second was \_\_\_\_ with a TWCC No. of \_\_\_\_\_. The carrier's claim number for this Date of Injury is \_\_\_\_\_. The carrier will be paying for DOS from 2/15/01 to 6/7/01 under this date of injury and claim no... The injury was to the claimant's right upper extremity and the \_\_\_\_ injury was to the left upper extremity. At one point, the carrier had disputed inclusion of an injury to the right elbow but has since withdrawn that dispute. I am forwarding copies of the adjustor's file notes and the TWCC-60 indicating that the bills have been placed in line for payment."

#### **V. ORDER**

In accordance with the Respondent's 09/24/02 statement indicating the carrier agrees to remit payment and Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Medical Review Division hereby ORDERS the Respondent to remit \$727.50 plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this order.

This Order is hereby issued this 31st day of October 2002.

Denise Terry  
Medical Dispute Resolution Officer  
Medical Review Division

DT/dt